CERTIFICATE OF NOMINATION TO FILL VACANCY

I, (WE), THE UNDERSIGNED party (cour	nty) (state) central committee chairperson(s),
hereby certify that in accordance with the laws of South Dakota	of
County, whose mailing address is	(list the district number if applicable)
was nominated to the office ofin order to fill the vacancy created by the (death) (withdrawal) of	(fist the district number, if applicable)
in order to fin the vacancy created by the (death) (withdrawar) or _	·································
(Signed) County) Central Committee	Chairperson
(State) (County) Central Committee	
(Signed) County) Central Committee	Chairperson
(State) (County) Central Committee	
(Signed)	Chairperson
(Signed) County) Central Committee	<u>.</u>
(Signed)	Chairnerson
(State) (County) Central Committee	Champerson
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(6: 1)	CI.:
(Signed) County) Central Committee	Cnairperson
(State) (County) Central Committee	
(Signed) County) Central Committee	Chairperson
(State) (County) Central Committee	
(Signed)	Chairperson
(State) (County) Central Committee	
Subscribed and sworn to before me this day of	20
subscribed and sworn to before the this day of	, 20
(Seal)	
My commission expires	Officer Administering Oath
I, (print candidate name here	e exactly as you want it on the election ballot),
under oath, declare that I am eligible to seek the office of	that I am
I, (print candidate name here under oath, declare that I am eligible to seek the office of registered to vote as a member of the Party, a in the district from which I am a candidate. If nominated and elected	and that if I am a legislative candidate I reside ed. I will qualify and serve in that office
(Candidate Signa	ature)
Sworn to before me this day of, 20	
(Seal)	Signature of Officer Administering Oath
My Commission Expires	
*	Title of Officer Administering Oath